Instructions for Filing Notice of Claim to City of Saint Paul

Minnesota State Statute 466.05 NOTICE OF CLAIM...(E)very person...who claims damages from any municipality...shall cause to be presented to the governing body of the municipality within 180 days after the alleged loss or injury is discovered a notice stating the time, place and circumstances thereof, and the amount of compensation or other relief demanded.

Type or print a response to each item on this form and send to:

Office of City Clerk 170 City Hall 15 Kellogg Blvd W St Paul, MN 55102

Name of Claimant:			
Address:			
Phone: (Work)	(Home)		
Date of Accident or Incident:			
Time of Accident or Incident:	(a.m.)	(p.m.)	
Location of Incident: (Please be specific: provide street address, intersection, use diagrams if necessary, and label with directions.)			
Diagram:			
	r documents to substa	other relief you are requesting. Attach Intiate your claim. If you are claiming auto tach them to this form.	

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Please list below the names, addresses, and telephonic incident:	one numbers of all witnesses to the accident or
Please state, in detail, how the incident or accident of event. Indicate how the City of Saint Paul is involved type of City property involved in this matter. You may	d, and the names of any City employees and/or
Police Case Number: (if applicable) C.N. #	
Please sign your name and date below:	
(Signature of Person Making Claim)	(Date)

Your claim will be referred to the Risk and Employee Benefit Management Division for investigation. You will be informed by their office on the disposition of your claim. For further information, you may contact the Risk Management Division, 150 City Hall, 15 Kellogg Blvd W, Saint Paul, MN 55102 at 266-8880.

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